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CONFIRMATION NO. 3345

<b>SERIAL NUMBER</b> 10/725,800	<b>FILING OR 371(c) DATE</b> 12/02/2003 <b>RULE</b>	<b>CLASS</b> 015	<b>GROUP ART UNIT</b> 1744	<b>ATTORNEY DOCKET NO.</b> US20020354	
<b>APPLICANTS</b> Carolyn L. Slone, St. Joseph, MI; <b>** CONTINUING DATA *****</b> <i>OK TIS</i> This appln claims benefit of 60/430,295 12/02/2002 <b>** FOREIGN APPLICATIONS *****</b> <i>NO DUB TIS</i> <b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 03/01/2004</b>					
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged <i>TIS</i> Examiner's Signature Initials		<b>STATE OR COUNTRY</b> MI	<b>SHEETS DRAWING</b> 20	<b>TOTAL CLAIMS</b> 27	<b>INDEPENDENT CLAIMS</b> 6
<b>ADDRESS</b> 00173					
<b>TITLE</b> System of vacuum accessibility for a vehicle					
<b>FILING FEE RECEIVED</b> 1284	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		